FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Reset Form

Parties must be filed electronically.

CAMPAIGN DISCLOSURE BUT

2012 DEC 31 PM 1:55

COMMITTEE NAME (Must be same as on Statement of Organization) DEAN SCH MIDT FOR SCH BUSCA	Political (Ren Logs Scar Com Audi DB.32A(7) and 68A.4 onsible for filing time	DRM R-2 DISCLOSURE REPORT Office Use Only In. # 18919 Jed In TA Inned
SIGNATURE OF PERSON FILING REPORT TELEPHONE		DATE SIGNED
IAM FILING A OCT 15 TH Brace DE 31 REPORT FOR (1) ELEC (report date)	CTION /(2)NON-El	ECTION YEAR.
□CHECK IF AMENDMENT TO REPORT DATED	Local Commi	ittees, enter Date of Election
	Nov	6 2012
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)	which Election	al Committees, enter County in in is held
STATEMENT OF CASH ON HAND		NEW THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
STATEMENT OF CASH ON TARE		30
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$	18320
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD	\$	
committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	w)	0
committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below Schedule F: Loans Received total (Attach Schedule F)	w)	
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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form
Constitution and Designation with East Con-

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF 1D NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
The second second	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization) TRÊASUIZE SEHMIDT. NAME AND ADDRESS TO WHOM CANDIDATE PURPOSE **AMOUNT** DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ALRELIA STAR ID# 1000 235 MAINST CK# AD AUBELIA FOWA 2012 CHRENICLE TIMES ID# NOU 113 2ND STS 15 CK# AO CHEARRE FOXA 2012 1D# AUBBLIK STAR Nev 235 MAIN 57 15 CK# # 10 MARCAS NEWS 20:2 ID# NOV 401 N MAIN ST 16 CK# AD MARCUS I 124 2012 ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL 18205

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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Page	of	

142

TOTAL (if last page of this schedule)

TO ELE	(Must be same as on Statement of Organization) CT DEAN SCHMINT SUPERVISOR DENNIA SCHMINT TIBLE 49463	G	F (Rev. 02/08) REC 8. RE
: This schedul	e reports money loaned to the committee which is deposited in the or	ommittee account.	CHECK THIS E AMENDING FO
I MONETAR	RY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD ource of loan, such as a bank, must be shown if a third party is involved		
DATE RECEIVED MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOA
			\$
			* * * * * * * * * * * * * * * * * * * *
	2	Algorithm and a second	
			The second secon
		TOTAL (PART I)	\$
(Loans fo	ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD orgiven must be reported on Schedule E In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT REPAIL
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) OF EAN SEA MID? US 65 L A VE		AMOUNT REPAIL
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO	AMOUNT REPAIR
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) OF EAN SEA MID? US 65 L A VE	RELATIONSHIP TO	AMOUNT REPAIR
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) OF EAN SEA MID? US 65 L A VE	RELATIONSHIP TO	AMOUNT REPAIR
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) PEAN SEHMIP? 4565 L AVE MEBUREN TONA 51037	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAIR

OR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE E	IN-KIND
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	CONTRIBUTIONS
Dean Schmidt for Supervisor		THIS BOX IF
Reset Fo	orm	ING FORM

Maria Cara Cara Cara Cara Cara Cara Cara		DEL ATIONOLUD	DESCRIPTION	ESTIMATED	√ IF FOR
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	OF IN KIND CONTRIBUTION	FAIR MARKET VALUE	FUND-RAISER CONTRIBUTION
12-19-2012	Dean Schmidt 4565 L Ave Meriden, IA	Self	Loan forgiven	\$ 1,648.10	
			SUB-TOTAL	\$	
				1	
			TOTAL (if last		
			page of this schedule)	1,648.10	
			Joniodalo)	1	1

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule E)